Table S3. Contingency table for infection events during once daily PrEP with $300\mathrm{mg}\ \mathrm{TDF}$

| | Adherence | | | | |
|------------|------------------|------------------|------------------|------------------|------------------|
| Inoc. size | 20% | 40% | 60% | 80% | 100% |
| 1 | (1927;73) | (1954;46) | (1959;41) | (1953;47) | (1952;48) |
| 5 | (1668;332) | (1720;280) | (1755;245) | (1768;232) | (1794;206) |
| 20 | (1046;954) | (1170;830) | (1274;726) | (1287;713) | (1323;677) |
| 100 | (154;1846) | (255;1745) | (312;1688) | (346;1654) | (337;1663) |
| | $p < 0.01^{+++}$ |

Predictions are based on 2000 'virtual patients' simulations respectively. The first number in the brackets in columns 2-6 indicates the number of 'virtual patients' that remained uninfected after viral challenge, whereas the second number indicates the number of patients that became infected. For example when 20% of once daily 300mg TDF pills are ingested and patients are challenged with inoculum size one (one virus reaches a target cell environment) 1927 'virtual patients' remained uninfected, whereas 73 became infected. $^{+++}$ Inoculum size has a significant impact on the number of infections at the p < 0.01 level (χ^2 -test).